

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH PTO-875)

SERIAL NO.

FILING DATE

10/52398

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51						
2	1	1					52						
3	1	1					53						
4		2					54						
5	1	1					55						
6		1					56						
7		1					57						
8		1					58						
9	1	1					59						
10	1	1					60						
11	1	1					61						
12	1	1					62						
13	1	1					63						
14		2					64						
15	1	1					65						
16	1	1					66						
17	1	1					67						
18		1					68						
19		1					69						
20		1					70						
21		1					71						
22							72						
23							73						
24							74						
25							75						
26							76						
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35							85						
36							86						
37							87						
38							88						
39							89						
40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.	57	↓		↓		↓	TOTAL IND.		↓		↓		↓
TOTAL DEP.	19	←		←		←	TOTAL DEP.		←		←		←
TOTAL CLAIMS	22						TOTAL CLAIMS						